

EXPRESS MAIL

DATE DEPOSITED:



EL988725275US

10/20/2003

PTO/SB/22 (10-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

#12

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
8403.522

Send to: Mail Stop Patent Ext.
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

In re Application of Donald E. Weder

Application Number 10/090,567

Filed 2/28/02

For FLORAL SLEEVE HAVING EXPANDABLE SIDEWALLS

Group Art Unit 3643 (Conf. No. 5406)

Examiner J. Gellner

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ _____
- ☐ Two months (37 CFR 1.17(a)(2)) \$ _____
- ☒ Three months (37 CFR 1.17(a)(3)) \$ 950.00
- ☐ Four months (37 CFR 1.17(a)(4)) \$ _____
- ☐ Five months (37 CFR 1.17(a)(5)) \$ _____

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1700.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

10/20/03
Date

Christopher W. Corbett
Signature

Christopher W. Corbett, Reg. No. 36,109

Typed or printed name

Adjustment date: 11/21/2003 AKELLEY
10/22/2003 AWONDAF1 00000135 041700 10090567
02 FC:1253 950.00 CR

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

10/22/2003 AWONDAF1 00000135 041700 10090567

02 FC:1253 950.00 DA

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>11/21/03</u>		2 Serial/Patent # <u>10/090,507</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time	12	10/20/03	\$ 950
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
			7 TOTAL AMOUNT OF REFUND	
			\$ 950	
8 TO BE REFUNDED BY:				
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 10 REASON: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="display: flex;"> <div style="width: 5%;"></div> <div style="width: 95%;"> <div style="padding: 5px;">Overpayment</div> <div style="padding: 5px;"><input checked="" type="checkbox"/> Duplicate Payment</div> <div style="padding: 5px;"><input checked="" type="checkbox"/> No Fee Due (Explanation):</div> </div> </div> </div> <div style="width: 50%;"> <div style="padding: 5px;"><input checked="" type="checkbox"/> Treasury Check</div> <div style="padding: 5px;">Credit Deposit A/C #:</div> <div style="border: 1px solid black; padding: 5px; display: flex; align-items: center;"> 9 <div style="display: flex; border-bottom: 1px solid black;"> <div style="border: 1px solid black; width: 20px; text-align: center;">0</div> <div style="border: 1px solid black; width: 20px; text-align: center;">4</div> <div style="border: 1px solid black; width: 20px; text-align: center;">--</div> <div style="border: 1px solid black; width: 20px; text-align: center;">1</div> <div style="border: 1px solid black; width: 20px; text-align: center;">7</div> <div style="border: 1px solid black; width: 20px; text-align: center;">0</div> <div style="border: 1px solid black; width: 20px; text-align: center;">0</div> </div> </div> </div> </div>				
<u>Ext. of Time filed outside six (6) months</u> <u>Statutory Period.</u>				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Andrea Smith</u>			TITLE: <u>Pets. Exmr.</u>	
SIGNATURE: <u>[Signature]</u>			PHONE: <u>703/308-6711</u>	
OFFICE: <u>Off. of Petitions</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>[Signature]</u>			DATE: <u>11/21/03</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B